



Bill to:
CM BROKERAGE
6846 E SOUTHPORT ROAD,
Indianapolis,
IN,
46237

Invoice Date: 07/26/2023
Invoice #: CMX8731
Terms: NET 30
Due Date: 08/26/2023

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
07/24/2023		17505 I-35W, Northlake, TX 76262, USA - 1331 Reynolds Street, Augusta, GA, USA			
			1	2400	2400

TOTAL
2400

PLEASE NOTE

The right to payment under this invoice has been assigned to Compass payment Solutions LLC (CFS) and all payments hereunder are to be directed to the assignee at the address noted below. Remittances to other than CFS do not constitute payment of this invoice. CFS must be given notification of any claims, agreements or merchandise returns which would affect the payment of all or part of this Invoice on the due date.

COMPASS FUNDING SOLUTIONS LLC
P.O.BOX 205154
DALLAS, TX 75320-5154
Tel: 844-899-8092

Shipment # **CMX8731****Rate Confirmation**

Monday, July 24, 2023 10:53 AM (Central Standard Time)

**CM LogistiX**

2300 Olympia Dr
270839
Flower Mound, TX 75027

FROM	DATE	TIME
	Joseph Alvarez	07/24/2023 08:00
joseph@cmlogistix.net		
TO	ATT	
	RIKI TRANSPORTATION INC	Edith -
PHONE	FAX	
	(708) 852-5664	

MC #	DOT #	TRUCK #	TRAILER #	DRIVER	DRIVER CELL	PU REF
86875	3119062	804	155279	Jordan	(708) 488-7038	
SIZE & TYPE		DESCRIPTION		PIECES	TOTAL WEIGHT	MILES
Van 53 FT		Building Supplies		0	40,200.00 LB	1,288.00

Carrier ETA: **Monday, July 24, 2023 6:00 AM****NOTES**

* Any load tenders accepted via email indicates carrier's approval of all rates, terms and conditions listed on load tender. This confirmation governs the rate for the movement of the above-referenced freight as of the date specified and hereby amends, and is incorporated by reference and becomes part of that certain Agreement by and between BROKER and CARRIER. By means of either its signature on the confirmation or its provision of service, CARRIER shall be conclusively presumed to have agreed to the rates and conditions set forth herein. CARRIER further represents and warrants that said mutually agreed upon rates are reasonable and compensatory, that the freight would not have been tendered to CARRIER at higher rates, and that no shipments handled under such rates will subsequently be subject to a later claim of undercharges.

* Carrier agrees for the above rate to perform transport services for CM LogistiX. Carrier agrees and understands that this contract is not a trip leases and that carrier is an independent contractor operating under its own operating authority. Carrier understands that all permits and taxes are its sole responsibility.

* All carriers and their drivers are responsible for an accurate count of Pallets, Skids, Crates, and Pieces as communicated by shipper's BOL.

* Any overages/shortages/damages (OS&D) must be communicated to CM LogistiX at time of pickup/delivery before departure from shipper/receiver.

* All trailers must be clean, empty, dry, and odor free.

* All travel directions provided by CM LogistiX are for informational purposes only. It is the carrier's sole responsibility to lawfully and safely operate all vehicles and their contents over any road, highway, bridge and/or route in strict compliance with all applicable laws, rules, and regulations.

* Carrier must advise if any delivery schedules, specifications, instructions or requirements cannot be legally accomplished or if the avoidance of any fines, penalties or dedications would require or result in the violation of any laws or regulations.

* Compensation may be withheld if this shipment is double-brokered, moved by rail, consolidated with any other freight or if the agreed services are not fulfilled.

* Carrier must be CARB compliant when traveling to, from, or through California and carrier agrees to and indemnify CM LogistiX and all other parties from any loss or damage resulting from carrier's failure to comply.

* When required, trailer seals must be applied with seal number noted on the Bill of Lading prior to departure from the shipper. Seals must not be broken without prior written approval from CM LogistiX. Failure to deliver at the designated consignee with proper seal intact will result in a claim.

* All carriers and their drivers must ACCEPT load TRACKING when prompted by CM LogistiX. \$200 FEE DEDUCTED FROM RATE CONFIRMATION IF NOT ACCEPTED

* Carrier must update all required information for PICKUP and DELIVERY events within 30 minutes of the event occurring. In the event a pickup or delivery will be LATE, carrier MUST contact CM LogistiX AS SOON AS POSSIBLE, or within a minimum of 2 hours prior to the scheduled appointment time. For in transit delays or issues at suppliers, please contact CM LogistiX at operations@cmlogistix.net or by phone at 469.802.8011.

* CM LogistiX will pay the rate above in accordance with established payment policy and/or terms outlined in the carrier agreement. Any adjustments or charges in excess of the rate above require written approval from CM LogistiX within 24 hours of delivery. Written authorization must accompany the final invoice or may not be included in the final payment.

* LATE FEE - a \$200 late fee will be deducted from the agreed rate amount for any missed pickup or delivery appointments per day (including weekends).

* Drivers to accept tracking via TruckerTools \$200 fee if not tracking.

* All invoices along with appropriate paperwork must be sent to billing@cmlogistix.net for payment within 15 days after delivery.

* All invoices must be accompanied with the following: Signed BOL / Signed POD / Rate Confirmation / Signed Accessorial Receipts

* All accessorial charges must be pre-approved by CM LogistiX and must reference CM LogistiX Load #

DESCRIPTION	WEIGHT	HANDLING UNITS	HAZMAT
40,200 LBS 20 Skids	40,200.00 LB		

Pickup Location (Stop # 1)			
Name:	Schluter Systems LP	Phone:	(469) 965-3050
Address:	17505 Interstate Hwy I-35W	Contact:	Primary Contact
Address:		Appt Date/Time:	07/24/2023 08:00
City, State Zip:	NORTHLAKE, TX 76262		07/24/2023 15:30
		PO #:	
		Hours:	08:00 -to-15:30
		Pickup Conf#:	

Drop Location (Stop # 2)			
Name:	SUMMIT FLOORING SUPPLY/SPRINGFIELD	Phone:	(417) 869-1005
Address:	227 N FREMONT AVENUE	Contact:	Main Contact
Address:		Appt Date/Time:	07/25/2023 07:00
City, State Zip:	SPRINGFIELD, MO 65802		07/25/2023 09:00
		PO #:	
		Hours:	07:00 -to-09:00
		Delivery Conf#:	

PO 967036-SFG
DN 23241014
8 Skids
15,700 LBS
Drop on Tail

Drop Location (Stop # 3)			
Name:	J J HAINES & CO INC/NASHVILLE	Phone:	(615) 254-1151
Address:	730 SPACE PARK SOUTH BLDG 13	Contact:	
Address:		Appt Date/Time:	07/26/2023 07:00
City, State Zip:	NASHVILLE, TN 37211		07/26/2023 15:00
		PO #:	
		Hours:	
		Delivery Conf#:	

PO 979976-NAS
DN 23241187
5 Skids
12,000 LBS
Drop on Belly

Drop Location (Stop # 4)			
Name:	TILE CENTER (Augusta)	Phone:	(706) 722-6804
Address:	1331 REYNOLDS ST	Contact:	Main Contact
Address:		Appt Date/Time:	07/26/2023 08:30
City, State Zip:	AUGUSTA, GA 30901		07/26/2023 15:30
		PO #:	
		Hours:	08:30 -to-15:30
		Delivery Conf#:	

PO 33050
 DN 23240629
 7 Skids
 12,500 LBS
 Drop on Nose

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CHARGES		
Freight Charge	\$2,400.00	
TOTAL RATE	\$2,400.00	

PLEASE EMAIL A COPY OF POD AND INVOICE TO: Billing (billing@cmlogistix.net)

E-SIGNATURE AGREEMENT

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- * All carriers and their drivers are responsible for an accurate count of Pallets, Skids, Crates, and Pieces as communicated by shipper's BOL.
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- * All trailers must be clean, empty, dry, and odor free.
- * All travel directions provided by CM LogistiX are for informational purposes only. It is the carrier's sole responsibility to lawfully and safely operate all vehicles and their contents over any road, highway, bridge and/or route in strict compliance with all applicable laws, rules, and regulations.
- * Carrier must advise if any delivery schedules, specifications, instructions or requirements cannot be legally accomplished or if the avoidance of any fines, penalties or dedications would require or result in the violation of any laws or regulations.
- * Compensation may be withheld if this shipment is double-brokered, moved by rail, consolidated with any other freight or if the agreed services are not fulfilled.
- * Carrier must be CARB compliant when traveling to, from, or through California and carrier agrees to and indemnify CM LogistiX and all other parties from any loss or damage resulting from carrier's failure to comply.
- * When required, trailer seals must be applied with seal number noted on the Bill of Lading prior to departure from the shipper. Seals must not be broken without prior written approval from CM LogistiX. Failure to deliver at the designated consignee with proper seal intact will result in a claim.
- * All carriers and their drivers must ACCEPT load TRACKING when prompted by CM LogistiX. \$200 FEE DEDUCTED FROM RATE CONFIRMATION IF NOT ACCEPTED
- * Carrier must update all required information for PICKUP and DELIVERY events within 30 minutes of the event occurring. In the event a pickup or delivery will be LATE, carrier MUST contact CM LogistiX AS SOON AS POSSIBLE, or within a minimum of 2 hours prior to the scheduled appointment time. For in transit delays or issues at suppliers, please contact CM LogistiX at operations@cmlogistix.net or by phone at 469.802.8011.
- * CM LogistiX will pay the rate above in accordance with established payment policy and/or terms outlined in the carrier agreement. Any adjustments or charges in excess of the rate above require written approval from CM LogistiX within 24 hours of delivery. Written authorization must accompany the final invoice or may not be included in the final payment.
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- * All invoices along with appropriate paperwork must be sent to billing@cmlogistix.net for payment within 15 days after delivery.
- * All invoices must be accompanied with the following: Signed BOL / Signed POD / Rate Confirmation / Signed Accessorial Receipts
- * All accessorial charges must be pre-approved by CM LogistiX and must reference CM LogistiX Load #

Carrier Signature Edith Taylor

Date 07/24/2023
M D YY

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BILL OF LADING NUMBER: 40118322130498330

Trailer number: 6127831
Seal number(s):
SCAC: CMXM
Pro number: CMX8731

THIRD PARTY FREIGHT CHARGES BILL TO

 CMX8731

FREIGHT CHARGE TERMS:

SPECIAL INSTRUCTIONS:

FREIGHT CHARGE TERMS:

Weight charges are prepaid unless marked otherwise)

Prepaid: ☒ Collect: ☐ 3rd Party: ☐

☐ Master Bill of Lading: with attached underlying Bills of Lading

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT [lb]	PALLET/SLIP (CIRCLE ONE)	ADDITIONAL SHIPPER INFO
23241014		15645.5	Y N	
			Y N	
			Y N	
			Y N	
			Y N	
GRAND TOTAL		15645.5		

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT [lb]	H.M. (X)	COMMODITY DESCRIPTION	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
						Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360		
						SEE ATTACHED		
						SUPPLEMENT PAGE		
0				15645.5		GRAND TOTAL		

where the rate is dependent on value, shippers are required to state specifically in writing the
freed or declared.
The agreed or declared value of the property is specifically stated by the shipper to be not
freed or declared.

COD Amount	0.00
Fee Terms:	Collect: <input type="checkbox"/> Prepay: <input type="checkbox"/>
Customer check acceptable:	<input type="checkbox"/>

per

See 19 USC § 14706(c)(1)(A) and (B).

NOTE: Liability Limitation for loss or damage in this shipment may be applicable. The carrier shall not make delivery of this shipment without payment of freight and all other ~~carriage~~ charges.

all other

Signature shipper

SHIPPER SIGNATURE / DATE

is to certify that the above named materials properly classified, described, packaged, and labelled, and are in proper condition for transportation according to the applicable regulations U.S. DOT.

Trailer loaded

☒ By Shipper ☐ By Driver

Freight Counted

☒ By Shipper
☐ By Driver/pallets said to contain
☐ By Driver/Pieces

CARRIER SIGNATURE / PICKUP DATE

CARRIER SIGNATURE _____
Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the U.S. DOT emergency response guidebook or equivalent documentation in the vehicle. Property described above is received in good order, except as noted.


documentation in good order except as noted.

52/42/1 7/5/23


① 7/24/23

Date: 07/24/2023

SHIP FROM
Name: SCHLUTER SYSTEMS LP DFW
Address: 17505 INTERSTATE 35W
City/State/Zip: NORTH LAKE TX 76262-3634 , US
SID#:

BILL OF LADING NUMBER: 40118322130498330

40240118322130498330

SHIP TO
Name: SUMMIT FLOORING SUPPLY/ Location #:
Address: SPRINGFIELD
City/State/Zip: 227 N FREMONT AVENUE
CID#: 967036-SFG

CARRIER NAME: CMXM
Trailer number:
Seal number(s): 6127831
SCAC: CMXM
Pro number: CMX8731

CMX8731

THIRD PARTY FREIGHT CHARGES BILL TO
Name:
Address:

City/State: **PALLET INTACT, CARTONS SUBJECT TO SUBSEQUENT COUNT**
DATE: 7-25-23

FREIGHT CHARGE TERMS:
(freight charges are prepaid unless marked otherwise)
Prepaid: ☒ Collect: ☐ 3rd Party: ☐
☐ Master Bill of Lading: with attached underlying Bills of Lading

CUSTOMER ORDER INFORMATION				ADDITIONAL SHIPPER INFO	
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT [lb]	PALLET/SLIP (CIRCLE ONE)		
TIME: 23241014		15645.5	Y N		
			Y N		
			Y N		
			Y N		
GRAND TOTAL		15645.5			

CARRIER INFORMATION				LTL ONLY	
COMMODITY DESCRIPTION				NMFC #	CLASS
Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 216 of HMR 49 CFR 171.16.					
SEE ATTACHED SUPPLEMENT PAGE					
GRAND TOTAL					

Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____
NOTE: Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. § 14706(c)(1)(A) and (B).

RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.

SHIPPER SIGNATURE / DATE	Trailer loaded Freight Counted	CARRIER SIGNATURE / PICKUP DATE
This is to certify that the above named materials are properly classified, described, packaged, marked and labelled, and are in proper condition for transportation according to the applicable regulations of the U.S. DOT.	<input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the U.S. DOT emergency response guidebook or equivalent documentation in the vehicle. Property described above is received in good order, except as noted.

Signature shipper
7/24/23
7/24/23

Date: 07/24/2023

SHIP FROM
Name: SCHLUTER SYSTEMS LP DFV
Address: 17505 INTERSTATE 35W
City/State/Zip: NORTH LAKE TX 76262-3634 , US

SHIP TO
Name: J J HAINES & CO INC/
NASHVILLE/NAS
Address: 730 SPACE PARK S
City/State/Zip: NASHVILLE TN 37211 , US
CID#: 979976-NAS

SID#: _____

FOB: ☐ _____

BILL OF LADING NUMBER: 40118322130498750

CARRIER NAME: CMXM

Trailer number: _____

Seal number(s): 6127843

SCAC: CMXM

Pro number: CMX8731

THIRD PARTY FREIGHT CHARGES BILL TO

Name: _____

Address: _____

City/State/Zip: _____

SPECIAL INSTRUCTIONS:

CUSTOMER ORDER INFORMATION					ADDITIONAL SHIPPER INFO	
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT [lb]	PALLET/SLIP (CIRCLE ONE)			
23241187		11947.0	Y	N		
			Y	N		
			Y	N		
			Y	N		
GRAND TOTAL		11947.0				

CARRIER INFORMATION					LTL ONLY	
HANDLING UNIT	PACKAGE	WEIGHT [lb]	H.M. (X)	COMMODITY DESCRIPTION	NMFC #	CLASS
QTY	TYPE	QTY	TYPE	Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(a) of NMFC Item 360		
				SEE ATTACHED		
				SUPPLEMENT PAGE		
5		11947.0		GRAND TOTAL		

Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____

Fee Terms: ☐ Collect ☐ Prepaid ☐

Customer check acceptable: ☐

NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. - 14706(c)(1)(A) and (B).

RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.

SHIPPER SIGNATURE / DATE This is to certify that the above named materials are properly classified, described, packaged, marked and labelled, and are in proper condition for transportation according to the applicable regulations of the U.S. DOT.	Trailer loaded <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	Freight Counted <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/Pieces	CARRIER SIGNATURE / PICKUP DATE Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the U.S. DOT emergency response guidebook or equivalent documentation in the vehicle. Property described above is received in good order, except as noted.
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Signature: _____

Signature shipper: _____

Signature: _____

Signature: _____

CHIP FROM

BILL OF LADING NUMBER: 40118322130498309

SHIP FROM

Name: SCHLUTER SYSTEMS LP Df-W
Address: 17505 INTERSTATE 35W
City/State/Zip: NORTHLAKE TX 76262-3634, US

FOB:

SID#

CARRIER NAME: CMXM

SHIP TO Location #:

SHIP
N. E. CENTER/AUGUSTA

Name: TILE CENTER/AUGUST
Address: 1331 REYNOLDS ST
FARMERSVILLE, CA 90801 US

City/State/Zip: AUGUSTA GA 30901, US

CID#: 33050

3050

THIRD PARTY FREIGHT CHARGES

Name: _____

Address:

City/State/Zip:

SPECIAL INSTRUCTIONS:

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WE/GHT [lb]	PALLET/SLIP (CIRCLE ONE)		ADDITIONAL SHIPPER INFO
23240629		12536.9	Y	N	
			Y	N	
			Y	N	
			Y	N	
GRAND TOTAL		12536.9			

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT [lb]	H.M. (X)	COMMODITY DESCRIPTION	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
						Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 900		
						SEE ATTACHED		
						SUPPLEMENT PAGE		
7				12536.9		GRAND TOTAL		

Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared.

The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____

per

NOTE Liability Limitation for loss or damage to:

RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper. If applicable, otherwise in the rate, alone, between and with other lawful charges.

Mr. Lo

Signature shipper

SHIPPER SIGNATURE / DATE

This is to certify that the above named materials are properly classified, described, packaged

marked and labelled, and are in proper condition for transportation according to the applicable regulations of the U.S. DOT.

Trailer loaded

☒ By Shipper☐ By Driver

Freight Counted

By Shipper

☐ By Driver/pallets said to contain☐ By Driver/Pieces

CARRIER SIGNATURE / PICKUP DATE

CARRIER SIGNATURE / PICKUP DATE

Carrier acknowledges receipt of packages and requires placards. Carrier certifies emergency response

information was made available and/or carrier has the
 the NOT emergency response guidebook or equivalent

documentation in the vehicle. Property described above is U.S. DOT order except as noted.

Received 7/24/23

2007